

FILED
CLERK U.S. DISTRICT COURT
DISTRICT OF DELAWAREUNITED STATES DISTRICT COURT
DISTRICT OF DELAWARE 2007 OCT 16 AM 8:51Jannette Sayore

Plaintiff

V.

State of DE - DHSS- Div of Child Support

Defendant(s)

Jannette Sayore

Petitioner/Plaintiff/Movant

Other

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT

CASE NUMBER: 07-636

declare that I am the (check appropriate box)

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? Yes No (If "No" go to Question 2)

If "YES" state the place of your incarceration _____

Inmate Identification Number (Required): _____

Are you employed at the institution? _____ Do you receive any payment from the institution? _____

Attach a ledger sheet from the institution of your incarceration showing at least the past six months' transactions

2. Are you currently employed? Yes No
Temp assignment @ Cigna - Claymont, DE
 a. If the answer is "YES" state the amount of your take-home salary or wages and pay period a.
\$1,00/40hrs = 440 weekly income
Insurance Overload Staffing Systems, 13760 Noel Rd, Suite 340
Dallas, Texas 75240-7308
 b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|--------------------------------------|-------------------------------------|
| a. Business, profession or other self-employment | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| b. Rent payments, interest or dividends | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| c. Pensions, annuities or life insurance payments | Yes <input checked="" type="radio"/> | No <input type="radio"/> |
| d. Disability or workers compensation payments | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| e. Gifts or inheritances | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| f. Any other sources <i>Emer. Assist/Welfare Dept</i> | Yes <input checked="" type="radio"/> | No <input type="radio"/> |

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive.

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AO 240 Reverse (Rev. 10/03)
DELAWARE (Rev. 4/05)

2007 OCT 16 AM 8:52

- \$191.28 monthly - ex-husband pension
 - When I lost my job 11-14-2006, j-01-2007 - welfare helped with fuel assisted And rent. I am still behind 2 months.
 - I presently work thru Temp Services. \$11.00 per /40 hr = \$440.00 Insurance Overload Staffing
 - I have 5-unemployment check left until end of Nov 2007.
4. Do you have any cash or checking or savings accounts? Yes No
 at this present time - catch-up past due - when Temp assignment ends
 If "Yes" state the total amount \$ 75.00 5/23/2007 & the next stated
66/28/2007 to Present 110-15-87
5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?

Yes

No

If "Yes" describe the property and state its value.

1994 Plymouth Voyager
 Value \$500.00

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, OR state NONE if applicable. <divorce/single parent

I am head of household - Mother of 5 children And 10 grandchildren
 N. A. S. - grandson - Head Start grandson
 B. K. - son - Unemployed - seek employment
 R. L. K. - son - he works

I'm Rebuilding - last year this time all was paid each month -

I declare under penalty of perjury that the above information is true and correct.

10-16-2007
DATE

SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.